# News Release
# Communiqué

Ontario

Ministry of Health and Long -Term Care
Ministry of Labour

Ministère de la Santé et des Soins de longue durée
Ministère du Travail

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**MCGUINTY GOVERNMENT COMMITTED TO APPLYING LESSONS LEARNED FROM SARS**

*Examining Final SARS Report To Strengthen Public Health System And Protect Frontline Workers*

TORONTO – The McGuinty government will use Mr. Justice Archie Campbell's final report on SARS to help further strengthen public health and better protect Ontarians and health care workers, Health and Long-Term Care Minister George Smitherman and Labour Minister Steve Peters said today.

Mr. Justice Archie Campbell, who was commissioned to investigate the outbreak of Severe Acute Respiratory Syndrome (SARS) in Ontario four years ago, released his third and final report today.

"The contributions of countless health professionals who helped us cope with SARS will never be forgotten," said Smitherman. "It is our job as government to learn from the experience and ensure we will be able to respond rapidly and effectively to any health emergencies. That's why we have heeded Justice Campbell's advice to date and we will do so again as we continue to better protect Ontarians and health care workers."

"Ontario's nurses can be assured that their safety is a priority for this government," Smitherman added. "As we apply the lessons learned from SARS we must honour those lives lost in the duty of service to Ontarians."

"We value the hard work and dedication of the approximately 500,000 health care workers who are on the front lines protecting us each and every day," said Peters. "Our government is committed to ensuring the health and safety of everyone who works in this province and we will carefully assess the recommendations put forward on protecting health care workers."

The third and final Campbell report explores the SARS crisis and future public health emergencies, and makes recommendations focusing, in particular, on health worker safety and strengthening the public health system.

Since the SARS crisis, the government has made significant progress in improving the health and safety of workers in the province, including the appointment of a new, permanent health and safety advisory committee under the Occupational Health and Safety Act to provide practical advice and recommendations on the unique occupational health and safety issues of health care workers to ensure they are protected. This committee, announced in September 2006, is made up of representatives of health care employers and unions.

Other improvements the government has made to public health, including those in direct response to Campbell's interim reports, are:

- Passing legislation to make the Chief Medical Officer of Health (CMOH) more independent
- Increasing funding to local public health units by more than 65 per cent, from $266 million in 2003 to $442 million in 2006.
- Establishing the Provincial Infectious Disease Advisory Committee to advise the CMOH on the prevention, surveillance and control of infectious diseases. A Ministry of Labour representative and an additional occupational health physician sit on the committee.
- Creating the Emergency Management Unit in response to SARS and the power outage of 2003, and improving communications between the ministry and health care stakeholders, including front line staff, at the time of a health crisis.
- Passing the Emergency Management and Civil Protection Act in June 2006, which provided additional powers to support the government's ability to respond in a provincial emergency
- Making Ontario a leader in pandemic preparedness through emergency planning, stockpiling antivirals, supplies and equipment, and distributing more than 15,000 infection control kits to front line health care providers.
- Working to supply N95 masks to front line health care workers to increase protection during an infectious disease outbreak

Furthermore, through changes in the Health System Improvements Bill introduced in December, 2006, the government proposes to:

- Establish Ontario's first Health Protection and Promotion Agency modelled after the Centres for Disease Control to provide specialized scientific and technical advice and support to government, front-line health care workers and public health units
- Allow the government to ensure the more efficient and effective distribution of medical supplies during a public health emergency
- Provide the CMOH with public health emergency powers where there is an immediate risk to health
- Provide local medical officers of health with the power to monitor, investigate and respond to an outbreak of a communicable disease in a hospital or institution.

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# Backgrounder/
# Document d'information

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## MCGUINTY GOVERNMENT COMMITTED TO APPLYING LESSONS LEARNED FROM SARS

*Examining Final SARS Report To Strengthen Public Health System And Protect Frontline Workers*

The Campbell commission, chaired by Justice Archie Campbell, was established in June 2003 to investigate how the SARS virus came to Ontario, how the virus spread, and how the province's health system responded.

### First Interim Report

The commission's first interim report (April 2004) outlined what happened, what lessons were learned, and what improvements should be made to Ontario's public health system.

Based on the first report's recommendations, the provincial government has implemented many changes, including:

- Making the Chief Medical Officer of Health (CMOH) more independent
- Promoting disease prevention and control through establishing the Provincial Infectious Diseases Advisory Committee, creating Regional Infection Control Networks to coordinate infection prevention and control activities and funding more than 110 infection Control Practitioners
- Increasing the province's share of public health funding from 50 to 75 per cent effective January 1, 2007
- Establishing the Capacity Review Committee to examine many issues raised by Justice Campbell such as local health unit governance, accountability, structure and capacity issues

### Second Interim Report

The commission's second interim report was released in April 2005. It focused on changes to the legislative framework for public health (the *Health Protection and Promotion Act*) as well as discussing Bill 138, the predecessor to the *Emergency Management and Civil Protection Act*. This report identified key gaps in the province's capacity to quickly respond and manage public health emergencies.

The government responded through Health System Improvements Bill (introduced in December 2006) with a series of changes to address those gaps and ensure Ontario has a health care system that is ready and able to respond in the event of a public health emergency. The changes would:

- Establish Ontario's first Health Protection and Promotion Agency modelled after the Centres for Disease Control to provide specialized scientific and technical advice and support to government, front-line health care workers and public health units
- Allow the government to ensure more efficient and effective distribution of medical supplies (including antitoxins, antivirals, antibiotics) where there is an immediate risk to health in a public health emergency, and regular procurement processes are unable to meet the needs of

Ontarians.

- Provide Ontario's Chief Medical Officer of Health with public health emergency powers to issue directives to health care providers concerning precautions and procedures, and where there is an immediate and serious risk to also:
    - order health care providers to provide information required to help the CMOH investigate and manage risks to human health; and
    - collect, retain and use pre-existing laboratory specimens to investigate, eliminate or reduce the risk to health
- Provide Medical Officers of Health with the power to monitor, investigate and respond to an outbreak of communicable disease in hospitals or institutions, and to notify a hospital or institution where a communicable disease may have been acquired but not previously reported
- Enable the Chief Medical Officer of Health to appoint Medical Officers of Health and Associate Medical Officers of Health who could be deployed to a specific part of the province in the event of a risk to the health of the public

**Improving Worker Health and Safety**

The government has also made significant progress in improving the health and safety of workers in the province since the SARS crisis, including:

- A new, permanent health and safety advisory committee under the Occupational Health and Safety Act to provide practical advice and recommendations on the unique occupational health and safety issues of health care workers to ensure they are protected. This committee is made up of representatives of health care employers and unions

- Hiring 200 additional health and safety inspectors, increasing the overall complement to 430 inspectors across the province. This addition includes inspectors dedicated to the health care sector who work with the industrial sector inspectors in inspecting health care facilities

- All 233 Ministry of Labour industrial sector inspectors and hygienists have now received extensive training on the Health Care and Residential Facilities Regulation under the Occupational Health and Safety Act, which includes training on infection control measures and procedures to protect workers. This means that more than 50 per cent of ministry health and safety inspectors are qualified to inspect health care facilities

- Inspecting all acute care facilities and selected long-term care homes in Ontario. Currently, the plan includes inspections of all health care facilities identified as high-risk and additional inspections of selected acute care and community health care facilities, and long-term care homes. As a result, the government has better capacity to handle future health care crises and emergencies, such as pandemic influenza that may affect the health care sector.

- The Ministry of Labour, the Ministry of Health and Long-Term Care, the Workplace Safety and Insurance Board, the Ontario Safety Association for Community and Health Care and other partners are working together to address health and safety issues in the health care sector such as personal protective equipment for health care workers.

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